

An insight into loneliness within Southampton's BME Communities – A summary of feedback provided

Reflecting evidence provided to the Combating Loneliness Inquiry Panel that people in ethnic minority groups are at particular risk of isolation and loneliness, to inform the Inquiry limited additional consultation has been undertaken with members of Southampton's diverse Black and Minority Ethnic Communities (BME) on the issue of loneliness.

The feedback provided below reflects conversations that the NHS Southampton Clinical Commissioning Group's Community Engagement Officer has had with members of the African, Sikh and Chinese communities and the visit by the Scrutiny Manager to Milan, an older Asian women's group in Southampton.

The summarised information provides an insight into the issue of loneliness amongst BME communities in Southampton. Given the limited sample size the information provided cannot purport to reflect a comprehensive understanding of the views of the diverse BME communities across the city.

Summary of findings:

General Feedback

- Reflecting evidence presented to the Inquiry Panel isolation and loneliness was identified as an issue during each of the discussions with the various BME communities.
- Feedback identified older members of the community; young mothers; those who have recently arrived in the UK and those with limited incomes as those most likely to experience loneliness.
- As expected a number of the issues raised were similar to those discussed by the Panel during evidence gathering meetings. Older people can often be lonely at home whilst their children and grandchildren are busy working, socialising and living apart from older generations. This reflects the fact that younger generations from more established communities have integrated into the wider society and adopted 'modern UK values'.

Additional risk factors facing some BME communities

- Language barriers – Inability to speak fluent English can limited ability to integrate, communicate, socialise and can lead to isolation within the home.
- I.T skills – The ability to communicate digitally can enable people to develop and maintain social connections. Language barriers can prevent access to opportunities to develop I.T skills.
- Cultural differences – Feedback provided identified that within some communities' shame and dignity may discourage people from seeking help, especially issues around isolation and depression. In some BME communities traditionally men and women are encouraged to, and prefer to, socialise in single gender groups.
- Moving to locations with fewer members from your BME community

Impact of loneliness

- Some members of the community are left isolated at home – Prevalence of depression was raised at a number of discussions.
- Waiting lists exist for some activities designed to encourage communities to socialise.

Opportunities (suggested by the Scrutiny Manager)

- Consider I.T sessions delivered in different languages
- Engage BME communities in the Community Solutions Local Cluster Groups
- Promotion of the Southampton Information Directory - Best way to get the message out is to visit the groups
- Encourage applications to small community grant schemes to help support the establishment of more self-funding community led initiatives that will reduce loneliness – I.T, cooking, singing, sewing, conversational English, cultural/educational outings have all been raised during the consultation.